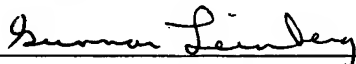
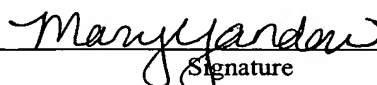


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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	10/055,189
		Filing Date	January 25, 2002
		First Named Inventor	Campbell et al.
		Group Art Unit	2622
		Examiner Name	To Be Assigned
Total Number of Pages in This Submission	4 pages and 1 cited reference	Attorney Docket Number	1508/3550 (D/A 1496)

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> A copy of the Notice to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input checked="" type="checkbox"/> A self-addressed, prepaid postcard for acknowledging receipt <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): PTO-1449 (1 page) (in duplicate) 1 cited reference
Remarks		<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 14-1138 for the above identified docket number.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Gunnar G. Leinberg Nixon Peabody LLP Clinton Square, P.O. Box 31051 Rochester, New York 14603-1051 Telephone: (585) 263-1014 Fax: (585) 263-1600
Signature	 Registration No. 35,584
Date	December 15, 2004

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PATENT
Docket No.: 1508/3550 (D/A 1496)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s) :	Campbell et al.)	Examiner:
Serial No. :	10/055,189)	To Be Assigned
Cnfrm. No. :	9199)	Art Unit:
Filed :	January 25, 2002)	2622
For :	A METHOD AND SYSTEM FOR SHOPPING)	
	FOR A CONSUMABLE FOR A DEVICE)	

**SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT
UNDER 37 CFR §§ 1.97-1.98**

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Commissioner for Patents
P.O. Box 1450
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Dear Sir:

In compliance with 37 C.F.R. 1.56, 1.97, and 1.98, published art included in the European Search Report (copy enclosed) of the corresponding European application, is cited for consideration and listed on the enclosed PTO-1449 form.

The European Search report identifies 1 (one) reference. This reference is relevant for the reasons given in the search report.

I hereby certify that the item contained in this information disclosure statement were cited in the European Search Report mailed September 15, 2004 in the corresponding European application, which is less than three months prior to the filing date of this statement.

It is our understanding that no fee is required as this Information Disclosure Statement is being filed within three months of the date of mailing of the European Search

Report. However, in the event that a fee is necessary, the Commissioner is authorized to charge PTO Account No. 14-1138 for any such fee.

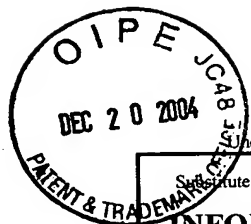
Respectfully submitted,

Date: Dec. 14, 2004

Gunnar G. Leinberg
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Clinton Square, P.O. Box 31051
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INFORMATION DISCLOSURE STATEMENT BY APPLICANT (use as many sheets as necessary)				Complete if Known	
				Application Number	
				Filing Date	
				First Named Inventor	
				Art Unit	
				Examiner Name	
Sheet	1	of	1	Attorney Docket Number	
				1508/3550 (D/A 1496)	

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. ¹	U.S. Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number - Kind Code ² (if known)			
		US-			
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FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No. ¹	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁶
		Country Code ³ Number ⁴ Kind Code ⁵ (if known)				
	1	EP 0 843 229 A2	05/20/1998	Europe		

OTHER PRIOR ART - NON PATENT LITERATURE DOCUMENTS			
Examiner Initials*	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²

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